



# Amended Montana Individual Income Tax Return Year \_\_\_\_\_

Fiscal Year Beginning \_\_\_\_\_ and Ending \_\_\_\_\_ If Fiduciary Return Check Box ☐

Attach copy of Original Return

Last Name	Your First Name & Middle Initial	Your Social Security No.
Spouse's Last Name if different	Spouse's First Name & Middle Initial	Spouse's Social Security No.
Address		City State Zip Code +4

**Notice: See  
back for special  
Instructions  
for tax year 1994**

➡ Please explain the changes on the back of this form ⬅

Filing Status Check One	1 Single <input type="checkbox"/>	2 Married filing joint return <input type="checkbox"/>	3 Married and both filing separate returns on this form <input type="checkbox"/>	4 Married and both filing separate returns on separate forms <input type="checkbox"/>	5 Married filing separate return and spouse is not filing <input type="checkbox"/>	6 Head of Household <input type="checkbox"/>
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This form must be filled out completely

## Income and Deductions

		As Filed or Last Corrected		Net Change		As Amended	
		COLUMN A for yourself, joint separate or single	COLUMN B (spouse)	COLUMN A Increase or Decrease	COLUMN B Increase or Decrease	COLUMN A for yourself, joint separate or single	COLUMN B (spouse)
1. Federal Adjusted Gross Income .....	1.						1.
2. Additions to income .....	2.						2.
3. Reduction of income .....	3.	( ) ( )				( ) ( )	3.
4. Montana adjusted gross income (1+2-3) .....	4.						4.
5. Deductions—(itemized or standard) .....	5.						5.
6. Subtract line 5 from 4 .....	6.						6.
7. Enter exemption deduction .....	7.						7.
8. Taxable income (subtract line 7 from line 6) ..	8.						8.

## Tax Liability

9. Tax liability from tax table .....	9.						9.
10. Tax on lump sum distribution .....	10.						10.
11. Subtotal, add lines 9 and 10 .....	11.						11.
12. Allowable credits .....	12.						12.
13. Subtotal, subtract line 12 from line 11 .....	13.						13.
14. Investment credit recapture from Form RIC .....	14.						14.
15. Old Fund Liability Tax *See below .....	15.						15.
16. Total tax, add lines 13, 14 and 15 .....	16.						16.
17. Contributions to other programs (list) .....	17.						17.
18. Total of lines 16 and 17 .....	18.						18.
19. Combine amounts on line 18 columns A & B .....	19.						19.
20. Montana tax withheld .....	20.						20.
21. Payments and credits on Estimated Tax .....	21.						21.
22. Elderly Homeowner/Renter Credit from Form 2EC...	22.						22.
23. Total of lines 20 through 22 .....	23.						23.
24. Combine amounts on line 23, columns A & B .....	24.						24.
25. Amount paid with original return, plus additional tax paid after it was filed (Tax only, do not include penalty and Interest) .....	25.						25.
26. Total of line 25 plus line 24 as amended .....	26.						26.

## Refund or Balance Due

27. Total refund(s) received for year amending .....	27.		27.
28. Subtract line 27 from line 26 and enter result .....	28.		28.
29. <b>Refund</b> to be received. If line 28 is more than line 19, enter the difference .....	29.	<b>Refund</b>	29.
30. Amount of line 29 to be credited to _____ estimated tax.....	30.		30.
31. <b>Tax Due.</b> If line 28 is less than line 19, enter difference. Please pay in full .....	31.	<b>Tax Due</b>	31.
32. Interest computed on amount shown on line 31 .....	32.		32.
33. <b>Balance Due</b> , add line 31 and 32. Please pay in full .....	33.	<b>Balance Due</b>	33.

\*OFLT no longer exists for years 1999 and beyond.

Make checks payable to the Department of Revenue  
**For TAX DUE Mail to:**  
Montana Department of Revenue  
PO Box 6308  
Helena, MT 59604-6308  
**For REFUND Mail to:**  
Montana Department of Revenue  
PO Box 6577  
Helena, MT 59604-6577

Post dated checks will be returned

Name, Address, and Telephone Number of Preparer

I, the undersigned, declare under the penalties of false swearing, that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief it is a true, correct, and complete return made in good faith.

Your Signature	Date	(Daytime) Telephone Number	Signature of Spouse	Date
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**It is recommended that you attach a copy of your original return.**

A new law enacted by the 1999 Montana legislature requires that taxpayers file an amended Montana income tax return if the federal government changes the taxpayer's federal taxable income. The amended return must identify the federal adjustments and must recalculate Montana tax for the year adjusted. Taxpayers must file the Montana amended return within 90 days of receiving the Internal Revenue Service's notification of the corrections made to the federal return.

Processing of amended returns takes longer than the processing of current year returns. Current year returns receive processing priority.